



MEMORANDUM

Austin Police Department Field Support Services Forensic Science Division

TO: Bill Gibbens, Division Manager
FROM: Tony Arnold, Quality Assurance Manager
DATE: September 29, 2009
SUBJECT: 2009 Annual Internal Audit

The Austin Police Department Forensic Science Division conducted its annual internal ASCLD/LAB accreditation audit and FBI DNA Audit during the months of August and September 2009. The ASCLD/LAB audit was conducted by Tony Arnold, Elizabeth Morris, Cecily Hamilton, Gloria Rodriguez, Jerry Pena, and Bill Gibbens. The DNA section audit was performed in conjunction with the FBI/DNA external audit.

The audit consisted of examining the lab utilizing the criteria described in the 2008 ASCLD/LAB Legacy Program accreditation guidelines as well as the FBI DNA audit document.

The Laboratory was found to be non-compliant to the following standards. The standards, the specific issue and the remediation to take place are listed below.

Standard: 1.4.2.10 (E) Does the laboratory routinely check the reliability of its reagents?
Section: Chemistry
Issue: Reagents not tested monthly as prescribed by the section SOPs. All analysts are missing monthly QC checks on multiple reagents.
Remediation: The reagent log books have been reviewed and all reagents have been quality checked. No reagents failed the quality check. These reagents are used for screening of drug evidence and no results were reported based exclusively on the results of these reagents.

Standard: 1.4.2.13 (E) Are the instruments/equipment properly calibrated?
Section: Crime Scene Laboratory / Chemistry Laboratory
Issue: SOPs state that maintenance logs must be kept regarding repairs for the laboratory vent hoods, back draft vents, thermometers, CA fume hood, electrostatic dust print lifter, dishwasher, humidity chamber, OmniChrome forensic light source, stir plates, camera/video equipment and vent hoods. No logs were located for these items.
Remediation: A review of the section SOPs indicates that no maintenance log is required for these items. The SOPs are being revised to remove this requirement.



AN ASCLD/LAB ACCREDITED LABORATORY SINCE 2005

Standard: 1.4.2.13 (E) Are the instruments/equipment properly calibrated?
Section: Chemistry
Issues: Section SOPs require performance verification after maintenance or repair. Repair was documented on 08-24-09 on the Cary 100 E19803001 UV Spectrophotometer, but performance verification was not documented until 09-11-09.
Remediation: This instrument is used for screening of drug evidence and no results were reported based exclusively on the results of this instrument. There was no adverse impact to drug casework.

Standard: 1.4.2.13 (E) Are the instruments/equipment properly calibrated?
Section: Chemistry
Issue: The section SOP states that the pipette delivery volumes must be checked annually to insure proper operation. Not all pipettes are checked for accuracy.
Remediation: Review of the section SOPs indicate that this requirement should apply only to variable pipettes. Accuracy checks on these pipettes are in pipette calibration log and are up to date. Wording will be revised in the SOPs to reflect only variable pipettes require calibration.

Standard: 1.4.2.22 (E) Does the laboratory have, use and document a system of technical review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?
Section: Crime Scene
Issue: The Section SOP requirements for technical review for some crime scene personnel have not been met.
Remediation: Review of the section SOPs indicate revisions to require that an average of three property crimes technicians' cases per month and 70% of the Crime Scene Specialists' and Supervisors' cases will be technically reviewed.

Standard: 1.4.2.22 (E) Does the laboratory have, use and document a system of technical review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?
Section: Latent Prints
Issue: The section training manual requires technical review of all cases authored by an examiner in training. Two cases completed while under supervised casework were administratively reviewed and reports issued without the necessary technical review being conducted.
Remediation: Reports requiring technical review, which did not receive the review, have been identified and will be reviewed and documented. Any issues resulting from those technical reviews, if any, will be addressed.



Standard: 1.4.2.22 (E) Does the laboratory have, use and document a system of technical review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?

Section: Chemistry

Issue: Case Review section of SOP says supervisor will ensure each case has technical and administrative review. The section further says that 75% will be technically reviewed.

Remediation: Review of the section SOPs indicate a revision is needed to clarify that 75% of the chemistry section cases receive technical review.

Standard: 1.4.2.23 (E) Does the laboratory conduct and document administrative reviews of all reports issued?

Section: Latent Prints

Issue: No reports can be issued without administrative review. Analysis results have been sent via email prior to issuance of an administratively reviewed report.

Remediation: Email notification will be limited to informing the customer that the analysis is completed and the report will be available as soon as the proper reviews are complete.

Standard: 1.4.3.4 (I) Does the laboratory conduct proficiency testing using re-examination or blind techniques?

Section: Division

Issue: Re-examination or blind testing is not practiced within the Division.

Remedy: No action necessary

Standard: 2.6.1 (I) Does each examiner possess a baccalaureate degree with science courses?

Section: Firearms

Issue: Not all examiners within the Firearms Section possess a baccalaureate degree.

Remedy: No action necessary

Standard: 2.8.1 (I) Does each examiner possess a baccalaureate degree with science courses?

Section: Latent Prints

Issue: Not all examiners possess a baccalaureate degree.

Remedy: No action necessary



Standard: 2.10.2 (E) Does each examiner understand the equipment, methods and procedures used?

Section: Crime Scene

Issue: The crime scene laboratory SOPs state that the following fields must be included to generate a new case: Case type, County, Agency ID, Submission type, Case number, Submitted by, Offense type, Offense date, Location of incident.

Remediation: Review of the section SOPs indicate a revision is needed to eliminate this requirement.

Standard: 3.4.1 (I) Does the laboratory have an effective health and safety program documented in a manual?

Section: Division

Issue: Not all employees received documented safety training during calendar year 2008, as required by the division Safety Training Outline.

Remediation: Review of the safety training program is in progress to ensure the required annual safety training is attended.

There were no findings in the DNA or Firearms sections.

